

STATE OF NEW HAMPSHIRE 2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

APR 1 9 2019

PLEASE PRINT

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) Casey Caldwell			DEI ARTIME
11. Name of lobbyist's partnership, firm or co	rporation, if any:		·
WellCare Health Plans, Inc.	•		
(Name of partnership, firm or cor	poration)		·
8735 Henderson Road, Ren 1, Floo	r 2 Tampa	FL	33634
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
(Telephone)	(Fax)	e-mail casey.caldy	well@wellcare.
III. This statement covers: (Choose one – file reportable expense transactions which are no	separate reports for t attributable to any	each client, OR you may fil	le a separate repor
All reportable transactions occurring in the n	nonths prior to the re	porting date relative to the fol	lowing client:
WellCa	re Health Plans	Inc.	
(Full Name of Client as it a	ppears on the Lobbyist	Registration Form)	
OR ☐ All reportable transactions by the lobbyist (in unrelated to any particular client.	cluding the lobbyist'	s family), or the lobbying firm	n listed below whic
IV. Date of Report April 24, 2019 X Reports cover: activity from date of registration	to 3/31/19 act	July 31, 2019 ivity from 4/1/19 to 6/30/19	
October 30, 2019 activity from 7/1/19 to 9/30/	19 ac	January 29, 2020 tivity from 10/1/19 to 12/31/19	
V. There have been no fees received and the state of this box is checked, complete just this form and Concord, NH 03301.	no reportable trand d submit it to the Sec	sactions made since the la retary of State's Office, State	ast report. X House, Room 204,
VI. Check if additional reports are attached:			
If you have received fees or made expenditu	res, you must file Ac	dendum A- Fees and Expen	ses
If you have paid an honorarium or reimburse Expense Reimbursement		•	
☐ If you, your firm, or your family has made p	olitical contributions	, you must file Addendum C	- Political Contribu
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and land complete to the best of my knowledge and b	RSA 664 and hereby elief. 	swear or affirm that the foreg	oing information is
(Signature of lobbyist)		(Date)	
Casey Caldwell (Print Name of lobbyist)			
(1 thin traine of toopyist)			